

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	dw	108904	9/24/00
O.I.P.E. CLASSIFIER		19	10/2/00
FORMALITY REVIEW	CM	71632	11/14/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

INDEX OF CLAIMS

Claim	Date
Final	
Original	11/10/04
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	✓
19	✓
20	✓
21	✓
22	✓
23	✓ 10
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If more than 150 claims or 10 actions
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Best Available Copy